



State of Washington
Application for a Water Right Permit

☐ SURFACE WATER ☒ GROUND WATER
☒ Permanent ☐ Temporary ☐ Short Term

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO
THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

For Ecology Use
(Date Stamp)

DEPT. OF ECOLOGY
FISCAL SERVICES
07 JUL 30 AM 10:28

Section 1. APPLICANT

Applicant/Business Name: JUANITA C. KANDI	Phone No: 253-564-9683	Other No: 253-882-3960
Address: PO BOX 64907		
City: UNIVERSITY PLACE	State: WA	Zip: 98464
Email Address (optional):		

Contact Name (if different from above): EMIEL KANDI	Phone No: 253-565-7700	Other No: 253-405-6844
Relationship to Applicant: AGENT		
Address: PO BOX 64907		
City: UNIVERSITY PLACE	State: WA	Zip: 98464
Email Address (optional): VILLAMORTGAGELLC@QWEST.NET		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: **PERMANENT WATER RIGHTS TO ALLOW FOR DRINKING, SEPTIC SYSTEM AND WASH WATER FOR HISTORICAL REENACTMENT OR AGRICULTURAL EVENTS AND ALL OTHER COMMERCIAL AND/OR AGRICULTURAL USES.**

Anticipated length of time to complete your project: _____

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only)		Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input type="checkbox"/> Cubic Feet per Second (CFS)	<input checked="" type="checkbox"/> Gallons per Minute (GPM)		
ALL USES				CONTINUOUSLY
TOTAL:				

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☐ NO

Is this request for a temporary permit? ☐ YES ☐ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: Permanent Water Right

S

For Ecology Use	APPLICATION NO: <u>G2-30423</u>	SEPA: Exempt/Not Exempt
Fee Paid: _____	Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned: _____	By: _____	Priority Date: <u>7/30/07</u> By: <u>XL</u> WRIA: <u>26</u>

Section 3. POINT OF DIVERSION OR WITHDRAWAL

Complete A or B, and C below

A.) If Surface Water Source				B.) If Ground Water Source		
<input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____				<input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____		
Source Name: _____				Well diameter & depth: 6" WIDTH 120' DEEP		
Tributary to: _____				Number of proposed points of withdrawal: <u>1</u>		
Number of proposed diversion points: _____				Do you have an existing well? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO				If available, attach Water Well Report and pump test.		
				Well Tag ID No. _____		
C.) Point of Diversion/Withdrawal – Legal Description						
Parcel No.	¼	¼	Section	Township	Range	County
031336005000	SE	SW	27	12N	06E	LEWIS
Lot(s)	Block(s)		Subdivision			
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: 800 Feet (<input checked="" type="checkbox"/> North/ <input type="checkbox"/> South) and 2600 feet (<input checked="" type="checkbox"/> East/ <input type="checkbox"/> West) from the (<input type="checkbox"/> NW <input checked="" type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/>) corner of Section 27 .						
Parcel No.	¼	¼	Section	Township	Range	County
Lot(s)	Block(s)		Subdivision			
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ feet (<input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet (<input type="checkbox"/> East/ <input type="checkbox"/> West) from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/>) corner of Section _____						

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☒ YES ☐ NO

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Provide the owner name(s), address, and phone number: **SEE ABOVE – SAME AS APPLICANT**

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

SEE ATTACHED EXHIBIT A

¼	¼	Section	Twp.	Range	County	Parcel No.
SE	SW	27	12N	06 E	LEWIS	031336005000

Do you own all the lands on which the proposed place of use is located? ☒ YES ☐ NO.

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Provide owner name(s), address, and phone number: _____

Are there any other water rights or claims associated with this property or water system? ☐ YES ☒ NO

If yes, provide the water right and/or claim numbers: _____

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): This is a new GR A TNC that will provide water for up to up to 4,000 people for a duration of 10 days in May and again in September. The well has been drilled and produces 62 gallons per minute. The plans are currently being completed for submittal to WSDOH. The proposed system will use 4-3,000 gallon plastic reservoirs for equalizing storage and 2 60-gallon per minute pumps will provide the pressurization. The designed pressure varies from 55-to 78 psi. The system will serve an on-site restaurant, and up to 4,000 campers with 100 spigots distributed throughout the park.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

Complete A or B, and C below

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served: 26	Present population to be served water: _____
Type of connections: 1 restaurant & 25 recreational (e.g., home, recreational cabin)	Estimate future population to be served: _____ (20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, date plan was approved ____/____/____ Water System Number: _____	
Name of water system: _____	
Are you within the service area of an existing water system? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: _____ _____ _____ _____ _____	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 300 ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: TO BE DETERMINED

Is the proposed project for a dairy farm? ☐ YES ☒ NO

Other Proposed Farm Uses

Describe all proposed uses: VINYARD / ORCHARD

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,

- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☒ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head _____ and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

Other Use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☐ YES ☒ NO

If you answered yes to any of the above questions, please describe: _____

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

From I-5 North or South take the Eastbound Highway 12 exit. (Exit # 68 – Avery Road) and continue Eastbound on Highway 12 approximately 48 miles until you come to the town of Randle, WA.

In Randle you will see a "T" intersection where State route 131 terminates into Highway 12. On the southwest corner of the intersection is the Mt. St. Helens – Mt. Adams Family Restaurant.

Turn onto State Route 131 and continue one mile until you come to a "Y" intersection and stay to the right. Continue another 0.9 miles to the intersection of State Route 131 and Skinner Road. An SCA sign will be posted at the intersection of State Route 131 and Skinner Road for your convenience. Take a hard right onto Skinner Road.

Continue on Skinner Road until both the 1.8 mile paved and 0.8 mile gravel county road end and continue following the SCA signs for another 2.5 miles until you reach the site. It's a total of 7 miles from the Highway 12 Junction to the site.

Site Address: 616-52-110-198-102-39 Skinner Road, Randle, WA 98377

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Juanita C. Kandi
Print Name
(Applicant or authorized representative)

Juanita C. Kandi
Signature

07-24-07
Date

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

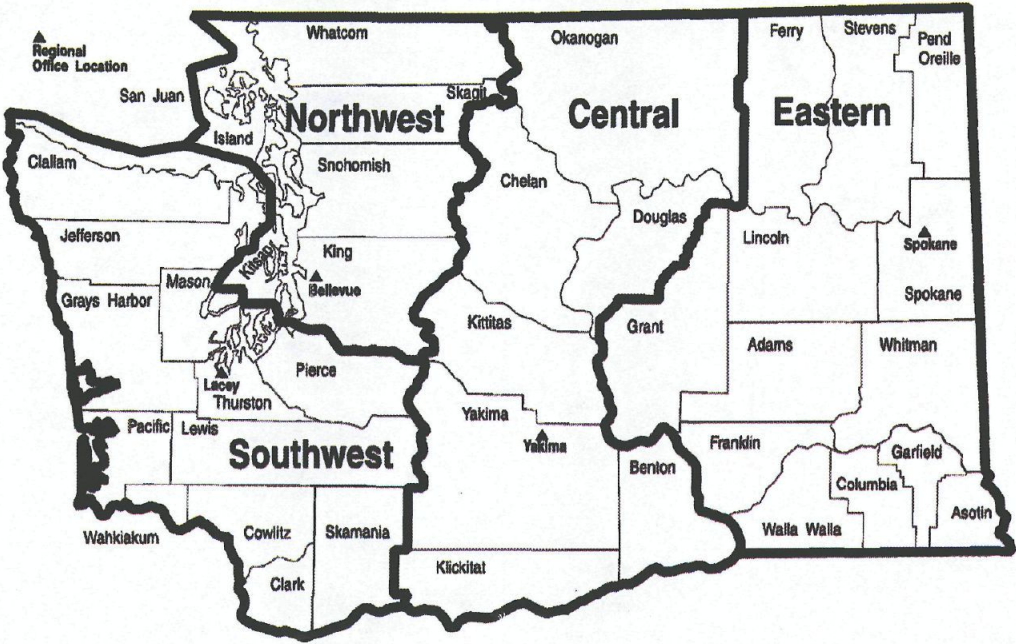
Signature

Date

Submit your application to: DEPARTMENT OF ECOLOGY
CASHIERING SECTION
PO BOX 5128
LACEY WA 98509-5128

Please check the region in which your proposed project is located.
☒ Southwest ☐ Northwest ☐ Central ☐ Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



Southwest Regional Office: 360-407-6300
Northwest Regional Office: 425-649-7000
Central Regional Office: 509-575-2490
Eastern Regional Office: 509-329-3400



If you need this document in an alternate format, please call the Water Resources Program at 360-407-6600. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341